

CERTIFICATE OF MAIL UNDER 37 C.F.R. 1.10

I hereby certify that this paper (along with any referred to as being attached or enclosed) is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to Assistant Commissioner for Patents, Washington, D.C. 20231 on February 4, 2003.

Signed: 

Laura Lee Mosier

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:
BOBROV *et al.*

Application No. 09/407,218

Filed: September 27, 1999

For: Decorative Material and Method of Its
Fabrication

Examiner: NOLAN, Sandra M.

Art Unit: 1772

AMENDMENT TRANSMITTAL

Assistant Commissioner for Patents
Washington, D.C. 20231

Sir:

Transmitted herewith is:

- ☒ Amendment;
☒ Other: Executed Revocation and Substitution of Power of Attorney.

The fees have been calculated as shown below:

	Claims Remaining After Amendment	Minus	Highest Previously Paid For	Present Extra	Small Entity Rate Fee	OR	Other than a Small Entity Rate Fee
Total Claims	20	-	20	0	x 9 = \$ 0		x 18 = \$ 0
Indep Claims	3	-	5	0	x 42 = \$ 0		x 84 = \$ 0
	[] Multiple Dependent Claim Presented and Fee not Previously Paid				+140 = \$ 0		+280 = \$ 0
					TOTAL \$ -0-		TOTAL -0-

Total Additional Claims Fee:

\$ -0-

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- ☐ Applicant hereby petitions for a ____ month Extension of Time to respond to the Official Action mailed _____ and includes the following fee:

<u>Small Entity</u>		<u>Large Entity</u>	
<input type="checkbox"/>	One month \$ 55.00	<input type="checkbox"/>	One month \$110.00
<input type="checkbox"/>	Two months \$205.00	<input type="checkbox"/>	Two months \$410.00
<input type="checkbox"/>	Three months \$465.00	<input type="checkbox"/>	Three months \$930.00
<input type="checkbox"/>	Four months \$725.00	<input type="checkbox"/>	Four months \$1,450.00
<input type="checkbox"/>	Five months \$985.00	<input type="checkbox"/>	Five months \$1,970.00

Extension of Time Fee: \$.00

- ☐ Fee regarding Information Disclosure Statement:
☐ Fee Under 37 CFR 1.17(p) \$
☐ Petition Fee Under 37 CFR 1.17(i) \$

Total Information Disclosure Statement Fee: \$.00

- ☐ Other fees (list individually):

Total Other Fees: \$.00
TOTAL FEES: \$.00

- ☐ A check including the amount of the above indicated TOTAL FEES is attached.
☐ Please charge Deposit Account No. 50-2319 in the amount of \$ _____.
☐ No fee is required.

- ☐ Applicant is now a SMALL / LARGE entity.

- ☒ The Commissioner is hereby authorized to charge any underpayment of the fees associated with this communication under 37 C.F.R. §1.20(d), including any necessary fees for extension of time, or credit any overpayment to Deposit Account No. 50-2319: (A-70977/AJT).

Respectfully submitted,

DORSEY & WHITNEY LLP

By Tianjun Hou
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